

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Ph	67814	7/1/00
O.I.P.E. CLASSIFIER		21	7/8/00
FORMALITY REVIEW	NL	533	8/15/00
RESPONSE FORMALITY REVIEW	MB	863	12-5-00

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral).... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Date
1	Final Original 6/2/00
2	✓ ✓ ✓ ✓
3	✓ ✓ ✓ ✓
4	✓ ✓ ✓ ✓
5	✓ ✓ ✓ ✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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